PATENT APPLICATION FEE DETERMINATION RECOR									ррисанон	UI D	ocker Helit	Je '	
Effective October 1, 2000								19755756					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								T EI	шт Э	OR	OTHER SMALL I		
TOTAL CLAIMS							RA	ΓE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			8 minus 20=		0		X\$	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		0		X40=			OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								AL		OR	TOTAL	7/10.00	
CLAIMS AS AMENDED - PART II											OTHER		
_	, .	(Column 1)			(Column 2) (Column 3)			LL.	ENTITY	OR	SMALL		
IENT A		REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA	RA	TE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 16	Minus	. 2	<i>50</i>	. —	X\$	9=		OR	X\$18=		
9	Independent	• 5	Minus		3	- 2	X4) -		OR	X80=	172.	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13	5= ,	. NEWS	OR	.+270 <u>=</u>		
							ADDIT.	JYAL		OR	YOYAL ADDIT, FEE	PHI	
	(Column 1) (Column 2) (Column 3							reș				. ;:	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE	ء. ر	PATE	'ADDI- TIONAL FEE	
15	Total	16	Minus	. /	?0	• /-	XS	9=		OR	X\$18=		
AMEND	Independent	£ 5	Minus	*** /	5	•	X4) -	•	OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+270=	·	
•								FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST 18ER OUSLY FOR	PRESENT EXTRA	RA*	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	••		=	X\$	9=		OR	X\$18=	,	
ME	Independent	•	Minus	•••		•	X4	0=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							S=		OR	+270=	-	
* If the order in enhann 1 is less than the entry in column 2, write "0" in column 3.											TOTAL		
"If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE													
The Trighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-475

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11.5. GPC: 2009-460-705/2010